

Schedule L Out-of-state Sellers' Shipment Report

	first ule before completion if you need to re s), make a photocopy and retain the co	port more that	an provided		Page _ ter you have	of
Step 1: Identify you Name:	Account ID: License number: LM FEIN: Federal Employer Identification number Liability period:/ (Month/Year)					
Address:Number and street						
City Country/Territory:						
o ☐ Check here if you had no	shipments to report during this tax period.	Telephone: (()		Ext:	
Invoice no. FEIN of and date whom you sold and shipped to	Name and complete address of whom you sold and shipped to	ıf		Equivalent in Alcohol 14 %	wine gallons Alcohol > 14% and < 20%	Alcohol 20% or more
	Page	subtotal				
	_	d total				